

# Enlighten Aesthetic of Cleveland Platelet Rich Plasma (PRP) Treatment – Patient Informed Consent

## **Platelet Rich Plasma**

PRP is your own blood plasma with your own platelets and growth proteins. PRP has been used for years in orthopedics and sports medicine to aid in healing of injured or damaged muscles, ligaments, tendons, joints, skin and pain control. Platelets are a type of blood cell that migrates to the location of an injury and assists in healing through the release of various growth factors and other proteins, which aid in healing, in part, by promoting the proliferation of fibroblasts, cells that make collagen and extracellular matrix – important components of healthy, youthful skin. PRP is theorized to improve wrinkles and other signs of aging by naturally stimulating your fibroblasts to produce collagen and other extracellular matrix skin components that are diminished or damaged over time as a result of aging among other factors. Collagen and extracellular matrix components are what give your skin its firm, smooth, youthful appearance. Native production of new collagen and dermal matrix components cannot keep up with age and sun damage related changes. PRP is a safe and natural process since it uses your own blood plasma cells and growth factors to stimulate new collagen in the targeted areas of concern, where we want your skin to repair and rejuvenate itself.

## **Aesthetic / cosmetic PRP indications**

include wrinkles, folds, face contours and reliefs, acne and other scars, divots or to increase volume where deemed necessary. PRP may also be an effective alternative to surgical scalp hair restoration. PRP can be used topically (e.g. after micro needling or fractional or full field laser resurfacing) or injected under the skin. PRP is usually used on the face, neck, décolletage (chest), scalp and hands, but may be used anywhere needed.

## **Contraindications include:**

pregnancy or breast-feeding, age 17 years old or younger, actively infected or significantly inflamed skin in the area/s of treatment and/or presence of any chronic infectious blood borne disease, such as HIV / AIDS or hepatitis. If you have HIV, AIDS, chronic hepatitis or any other chronic infectious disease, please let us know prior scheduling PRP therapy. A blood test may be required prior PRP therapy. Other or relative contraindications include any reason to be prone to significant bruising, infection or poor healing, and any contraindication to micro needling or laser resurfacing, which may be part of the PRP procedure. One or several treatment sessions at approximately monthly intervals is usually recommended until desired result is achieved, followed by periodic maintenance or touch-up treatments at 3-12 month intervals. Response and number of sessions may vary by patient. Smokers may require more treatment sessions than non-smokers as tobacco smoke toxins may diminish cellular responsiveness to PRP. After PRP is injected, some improvement is usually noticeable immediately, however, there is typically a return to your baseline within several days as the fluid portion of PRP is absorbed by your body before the complete effects of the regenerative process. Our PRP Facelift results improve slowly over several weeks to months and last several

months to two years or possibly longer. Adjunct products / treatments are often combined with PRP to improve the effectiveness of PRP or enhance overall cosmetic outcome. PRP therapy stimulates your skin to grow new, younger tissue; however, does not prevent muscle movement or resurface the skin. Thus, most patients see best results when combining PRP treatments with other anti-aging treatments such as Botox, dermal fillers, resurfacing and/or tightening treatments and skin care products, etc. (Avoid deep peels or resurfacing for 2 weeks after PRP injections.)

## **Common aesthetic treatments with PRP at Enlighten Aesthetic of Cleveland include:**

### **-PRP Facial**

PRP is applied topically to skin after microdermabrasion, micro needling, or fractional or full field laser resurfacing. Generally, you may notice immediate and more significant longer term skin improvements, especially with multiple or ongoing treatments. For best results, we recommend an initial series of 3-6 treatments at 2-4 week intervals and periodic maintenance thereafter.

### **-PRP Facelift**

PRP is injected under the skin alone or in combination with a scaffolding of other synthetic fillers such as the hyaluronic acid-based fillers (i.e. Restylane or Juvederm family of fillers per consult.) Akin to the Vampire Facelift. The Vampire Facelift combines injected PRP with Juvederm or Restylane.

### **-PRP Hair Restoration**

PRP is applied topically as in PRP Facial. Several monthly and periodic maintenance sessions recommended.

The PRP procedure requires approximately 30 cc of your blood that we obtain in the same way as your blood is drawn for lab tests. Your blood is collected in sterile, specialized test tubes that are spun in a centrifuge to separate the red blood cells from PRP component. The PRP is then removed and either applied topically or injected where desired. After injected under the skin or applied topically, the PRP regenerative process begins and you are on your way to more youthful skin.

### **Discomfort & Risks:**

The injection and/or topical application of PRP are very safe because it is derived from your own blood. There are no preservatives used in PRP and no chance of your body rejecting the cells. Thus, no allergy testing is required. The primary risks and discomforts are related to the blood draw, including a slight pinch related to the needle insertion and possible bruising at the blood draw site. Other risks or side effects are generally temporary and injection related and may include, but are not limited to:

- Injection needle marks (Visible needle marks are not unusual and resolve quickly or within a few days.)

- Swelling (Apply an ice or cold pack 5-15 minutes per hour until any swelling resolves, usually within 12-24 hours.)
- Bruising is always a possibility with any skin injections. Avoid aspirin, anti-inflammatory medications (i.e. ibuprofen), blood thinners, herbal supplements, vitamin E and fish oil for at least one week prior PRP therapy to minimize bruising risk. You may restart these medications, supplements, vitamins, etc. the day following PRP therapy.
  - Any bruising that may occur generally resolves within 7-14 days and may be covered with makeup as needed.
  - Itching is not common, but if occurs, is temporary and may be treated with over the counter anti-histamines, if needed.
  - Post-PRP pain is not common, but tenderness may occur and is generally short-lived, but may last up to 1-2 weeks. Tylenol (per package insert instructions) may be taken to reduce any post-PRP discomfort if needed.
  - Lumps / Bumps usually represent bruising or swelling and generally subside within a few days to a couple of weeks.
  - Infection is extremely rare, but if occurs may require treatment including topical and/or oral antibiotics.
  - Asymmetry – The human face is normally asymmetrical in appearance and anatomy. Also, it may not be possible to achieve or maintain exact symmetry with PRP injections as there can be variation in response to PRP from one side of the face to the other.
  - Unsatisfactory Result – Uncommonly, some patients may have an unsatisfactory result including: temporary visible irregularities, prolonged swelling, bruising and / or tenderness and / or disappointment in the result.

#### **Alternatives to PRP and/or Adjunct Treatments:**

PRP therapy is strictly a voluntary cosmetic procedure (i.e. no treatment is necessary or required.) Alternative and/ or complementary treatments may include, but are not limited to: anti-aging topical creams, neuromodulators (e.g. Botox), dermal fillers, chemical peels, laser resurfacing and other laser treatments, cosmetic surgery or no treatment.

#### **After Care for Injected PRP**

• **What to Expect After PRP Injections:** Immediately following the procedure, the most commonly reported temporary side effects are redness, swelling, bruising, tenderness, tingling, numbness, lumpiness, and/or a feeling of pressure or fullness at the injection sites and/or in the treated area(s). Cold gel packs/ice may be applied immediately after treatment to reduce swelling.

• **To Maximize Results and Prevent Complications:**

- o Avoid scrubbing the injection sites for at least 4 hours. However, makeup may be applied immediately after, if desired.
- o Starting on the evening of the treatment and for the next several days; wash your face gently with a mild cleanser (e.g. Aquanil or similar) once to twice daily. After several days, you may return to your regular skin care routine.
- o Avoid direct high heat (e.g. blow dryer, sun, sauna, steam room, very hot shower, hot yoga, strenuous exercise, etc.) until the morning after treatment.

## **After Care of Topical Application of PRP associated with PRP Facial or Hair Restoration:**

- **To Maximize Results:** For a minimum of 5 hours after the PRP has been applied to your skin, do NOT: wash your skin, expose the treated area/s to direct high heat, or engage in activities that will get you wet or cause you to sweat (e.g. blow dryer, sun exposure, sauna, steam room, Jacuzzi, very hot shower, hot yoga, strenuous exercise, etc.)
- **After PRP Application,** we may apply a topical antibiotic ointment or other soothing / healing ointment (e.g. Aquafor, Vaniply). Starting on the evening of the treatment, wash your face gently with a mild cleanser (e.g. Aquanil or similar) twice daily followed by application of hyaluronic acid and/or Neocutis MPC containing Micro Serum / Creams (that nourishes new collagen) and then, Aquafor healing ointment or antibiotic ointment as needed. Also, use an SPF 30 sun block each morning until healed. Avoid makeup for at least 24 hours and until healed. You may return to your regular skin care routine when healed. For Scalp applications, shampoo and condition your scalp daily starting the first evening or the next morning after PRP. Otherwise, also follow all non-contradictory peri-procedural instructions for micro needling or laser resurfacing, if applicable.

### **Clinical Photography:**

I also give my consent to be photographed or filmed. These photos and / or videos will belong to our practice and may be used for marketing, medical, documentation, educational and scientific purposes, unless you retract this consent via certified letter.

### **Results Not Guaranteed:**

Although good results are expected, we cannot guarantee or warranty that you will be completely satisfied with the outcome or that you will not require additional treatments and/or ongoing treatments to achieve or maintain the result you seek. I understand and acknowledge that payment for the above procedure is non-refundable; and that if more correction is desired, I will be responsible for purchasing additional PRP and/or other adjunct procedures that may be recommended.

### **Complete Medical History:**

I have truthfully and accurately disclosed all personal medical history information including but not limited to: all previous aesthetic procedures; invasive medical procedures; my use of all medications, drugs, herbs, vitamins, or other supplements; and all known allergic reactions. Also, I agree to keep Enlighten Aesthetic of Cleveland updated as to any changes in my medical profile, including any new medications during the course of my treatments, as failure to do so may negatively affect my results. I release Enlighten Aesthetic of Cleveland and staff of any and all liability relating to adverse reactions due to non-disclosure.

**Certification of Consent to Proceed with Treatment:**

I understand that this treatment may involve risks of complications or injuries from both known and unknown causes, and I freely assume those risks. I understand that if I am not willing to accept all risks associated with this procedure then I should not have PRP treatment. I certify that all my questions have been addressed / answered to my satisfaction, that I have read this entire consent, and that I understand and agree to the information herein. I understand that to receive PRP treatment, I must comply with all stipulations outlined in this consent form; if I do not agree, then I will not be able to proceed with treatment. I accept all risks associated with PRP therapy and elect to proceed with treatment today as well as future and ongoing treatments.

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Patient Name (Print) Patient / Guardian Signature Date

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Provider Name (Print) Provider Signature Date

If you have any questions or concerns, please contact us as soon as possible at

**440 449-7707**

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